FORM D

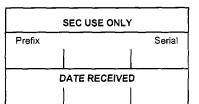
# **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL					
OMB Number:	3235-0076				
Expires:	May 31, 2005				
Estimated average burden					
hours per form	16.00				



Name of Offering ([ ] check if this is an am								
Finaplex, Inc. Series B Preferred Stock W								
Filing Under (Check box(es) that apply):	[ ] Rule 504	[ ] Rule 505	[X] Rule 506	[ ]Section 4(6	) COLUCTION OF THE PROPERTY OF			
Type of Filing: [X] New Filing	[] Amendment			·	CEIVED JOS			
A. BASIC IDENTIFICATION DATA								
1. Enter the information requested about	the issuer			*.	faj.			
Name of Issuer ([ ] check if this is an amen	dment and name has change	d, and indicate cha	inge.)		-200 KSV			
Finaplex, Inc.				·	<u> (3) f 59</u>			
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Numb	er (Including Area C	ode)////			
333 Bush Street, 11th Floor, San Francisc	co, CA 94104		(415) 490-2200					
Address of Principal Business Operations	er (Including Area 🧗	POPPOR						
(if different from Executive Offices)		/ ~ COOKD						
				/	1111 15 2 2 2			
Brief Description of Business					age & 0 5004			
Builder of enterprise software for Interne	t-enabled private banking a	and asset manage	ment	\	-441			
Type of Business Organization				$\sqrt{I}$	MANSON			
[X] corporation	[ ] limited partnershi	p, already formed		[ ] other (please s	specify). CAL			
[ ] business trust	[ ] limited partnershi	p, to be formed			·			
	N	Month Yes	ar					
Actual or Estimated Date of Incorporation o	r Organization :	[05]	[2000]	[X] Actual	[ ] Estimated			
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:								
	CN for Canada;	FN for foreign jur	isdiction)		[DE]			

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

### A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[ ] Promoter [X] Beneficial Owner [ ] General and/or Managing Partner	[X] Executive Officer	[X] Director						
Full Name (Last name first, if inc									
Cagney, Michael S.									
Business or Residence Address (	Number and Street, City, State, Zip Code)								
c/o Finaplex, Inc., 333 Bush Str	reet, 11th Floor, San Francisco, CA 94104								
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[ ] Executive Officer	[X] Director						
Full Name (Last name first, if inc	lividual)								
Golding, Rex			v						
	Number and Street, City, State, Zip Code)								
	reet, 11th Floor, San Francisco, CA 94104	(1) D	COLD.						
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[ ] Executive Officer	[X] Director						
Full Name (Last name first, if inc	lividual)								
Hutton, Thompson									
	Number and Street, City, State, Zip Code)	•							
	reet, 11th Floor, San Francisco, CA 94104	CTD TO 0.00	[ ] ]						
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[X] Executive Officer	[ ] Director						
Full Name (Last name first, if inc	lividual)								
Jaeger, Keith									
,	Number and Street, City, State, Zip Code)								
	eet, 11th Floor, San Francisco, CA 94104								
Check Box(es) that Apply:	[ ] Promoter [ ] Beneficial Owner [ ] General and/or Managing Partner	[ ] Executive Officer	[X] Director						
Full Name (Last name first, if ind									
Jarve, John W.	iividdai)								
	Number and Street, City, State, Zip Code)			—					
	reet, 11th Floor, San Francisco, CA 94104								
Check Box(es) that Apply:	Promoter Beneficial Owner	[ ] Executive Officer	[X] Director						
	[ ] General and/or Managing Partner								
Full Name (Last name first, if ind	lividual)								
Jewett, Walter									
•	Number and Street, City, State, Zip Code)								
	eet, 11th Floor, San Francisco, CA 94104								
Check Box(es) that Apply:	[ ] Promoter [X] Beneficial Owner	[X] Executive Officer	[ ] Director						
F 1127 (F	[ ] General and/or Managing Partner								
Full Name (Last name first, if ind	lividual)								
Lee, Jeffrey A.	Number and Street, City, State, Zip Code)								
	eet, 11th Floor, San Francisco, CA 94104								
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[ ] Executive Officer	[ ] Director						
Check Box(es) that Apply.	General and/or Managing Partner	[ ] Executive Officer	[ ] Director						
Full Name (Last name first, if ind	<del></del>								
Menlo Ventures IX, L.P.	······································								
	Number and Street, City, State, Zip Code)								
	4, Suite 100, Menlo Park, CA 94025								
Check Box(es) that Apply:	[ ] Promoter [X] Beneficial Owner	[X] Executive Officer	[ ] Director						
	[ ] General and/or Managing Partner								
Full Name (Last name first, if ind	lividual)								
Ou, June S.	1 10 00 00 00								
	Number and Street, City, State, Zip Code)								
c/o r mapiex, inc., 333 Bush Str	eet, 11th Floor, San Francisco, CA 94104								

Check Box(es) that Apply.	[ ] I follows	[A] Delicitationici	[ ] Executive Officer	[ ] Director					
[ ] General and/or Managing Partner									
Full Name (Last name first, if individual)									
SOFTBANK Technology Ventures VI, L.P.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
200 West Evelyn Avenue, Suit	e 200, Mountain Vie	v, CA 94041							
Check Box(es) that Apply:	[ ] Promoter	[X] Beneficial Owner	[ ] Executive Officer	[ ] Director					
	[] General and/o	r Managing Partner							
Full Name (Last name first, if in	dividual)								
SOFTBANK U.S. Ventures Fu	ınd VI, L.P.								
Business or Residence Address (	(Number and Street, C	City, State, Zip Code)							
200 West Evelyn Avenue, Suit	e 200, Mountain Vie	v, CA 94041							
Check Box(es) that Apply:	[ ] Promoter	Beneficial Owner	[X] Executive Officer	[X] Director					
	[] General and/o	r Managing Partner							
Full Name (Last name first, if in	dividual)	-							
Tierney, Peter									
Business or Residence Address (Number and Street, City, State, Zip Code)									
c/o Finaplex, Inc., 333 Bush Street, 11th Floor, San Francisco, CA 94104									
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)									
	(000 0								

	4. Hai 1941.	16,74	British .	В	. INFC	RMAT	TON A	BOUT	OFFER	RING	116	100		
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.										es No [X]				
2. What is the minimum investment that will be accepted from any individual?										<u>\$</u>	NONE			
3.														
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. NONE														
Ful	l Name (Last r	name first,	if individu	al)										
Bus	siness or Resid	ence Addı	ress (Numb	er and Stre	eet, City, S	State, Zip C	Code)				<del></del>			
Nar	ne of Associat	ed Broker	or Dealer										<del></del>	
Stat	tes in Which P	erson List	ed Has Sol	icited or In	tends to S	olicit Purcl	hasers		<del></del> .		. 4			
	(Check	"All State	s" or check	c individua	l States)								[ ] A]]	States
	(AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	· States
Full	Name (Last n	ame first,	if individu	al)										
Bus	iness or Resid	ence Addı	ess (Numb	er and Stre	et, City, S	tate, Zip C	Code)			<del></del>				
Nar	ne of Associate	ed Broker	or Dealer											
Stat	es in Which P	erson List	ed Has Sol	icited or In	tends to S	olicit Purch	nasers							
	(Check	"All State	s" or check	individua	l States)		•••••				•••••		[ ] Ail	States
Full	[AL] [IL] [MT] [RI] Name (Last n	[AK] [IN] [NE] [SC] ame first,	[AZ] [IA] [NV] [SD] if individual	[AR] [KS] [NH] [TN] al)	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Bus	iness or Reside	ence Addr	ess (Numb	er and Stre	et, Citv. S	tate, Zip C	(ode)							
	ne of Associate		`.											
			————											
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
				individual	•									States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
			(	Use blank	sheet, or o	copy and u	se addition	al copies o	of this shee	t, as neces	sary.)			

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [ ] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	1	Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$	
	Equity	\$		\$	
	[ ] Common [ ] Preferred				
	Convertible Securities (including Series B Preferred Stock Warrants)	\$	1,982,048.61	\$	0.00
	Partnership Interests	s		\$	
	Other (specify)	\$		\$	
	Total	\$	1,982,048.61	\$	0.00
	Answer also in Appendix, Column 3, if filing Under ULOE	Ψ	1,702,040.01	Ψ	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number	Agg	regate Dollar Amount
			Investors	1.00	of Purchases
	Accredited Investors		1	<b>s</b> _	1,982,048.61
	Non-accredited Investors			\$	
	Total (for filings Under Rule 504 Only)			\$	
	Answer also in Appendix, Column 4 if filing under ULOE				
3.	If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504				
	Total			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		[]	\$	
	Printing and Engraving Costs		[]	\$	
	Legal Fees		[X]	\$	10,000.00
	Accounting Fees	•••••	[]	\$	
	Engineering Fees				
	Sales Commissions (Specify finder's fees separately)		[]	\$	
	Finder's Fees				
	Other Expenses (identify):			s	
	Total			\$	10,000.00
	1		[22]	<b></b> -	

1.

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." ...... 1,972,048.61 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above. Payments to Officers, Directors, & Affiliates Payments To Others Salaries and fees....... Purchase of real estate ...... Purchase, rental or leasing and installation of machinery and equipment....... [ ] Construction or leasing of plant buildings and facilities ...... \_[ ]\_ Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets of securities of another Repayment of indebtedness..... \_[ ]\_ Working capital...... 1,972,048.61 \_[ ]\_ Column totals [ ] [X]Total payments listed (column totals added) ...... 1,972,048.61 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502 Issuer (Print or Type) Date 7/15/04 Finaplex, Inc.

### Attention

Title of Signer (Print or Type)

Secretary

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Name of Signer (Print or Type)

Peter Cohn